
Declaration of Confidentiality

In serving Inclusion Clare, I may be entrusted with knowledge of the personal and private affairs of the individuals we serve, information concerning the employees, and other types of confidential information pertaining to the Agency.

I hereby commit to never divulge any of this confidential information with any unauthorized person, either during the term of my employment/volunteer association with Inclusion Clare or thereafter.

“Confidential information” refers to:

- Medical information
- Family situations
- Salaries and conditions of employment; staff evaluations
- Private conversations/discussions
- Any other information deemed confidential

I also acknowledge that a violation of this commitment may subject me to disciplinary measures or may result in my not being eligible for future employment/volunteer association with Inclusion Clare.

I have considered and understood this statement.

Name (Please print)

Signature

Date